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(Ireland.)

F I R S T
R E P O R T

FROM THE

SELECT COMMITTEE

On the State of Disease, and Condition of the
Labouring Poor, in Ireland.

*Ordered, by The House of Commons, to be Printed,
17 May 1819.*

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THE SELECT COMMITTEE appointed to inquire into the State of *Ireland*, as to Disease, and how far the Measures, remedial and preventive, adopted by the Legislature or otherwise during the last year, have been effective for its removal or mitigation; and also into the Condition of the Labouring Poor of that part of the United Kingdom, with a view to facilitate the application of the Funds of private Individuals and Associations, for their Employment in useful and productive Labour; and to report their Observations, together with their Opinion on these Subjects, from time to time to The House;—HAVE, pursuant to the Order of The House, examined the matters to them referred, and have agreed to the following REPORT:

YOUR Committee have, in compliance with the order of reference, directed their attention, in the first place, to the examination of the actual state of *Ireland* as to Disease, and the effect of the Legislative provisions humanely enacted in the last Session of Parliament, for the removal or mitigation of that public calamity. They now proceed, under the power intrusted to them of reporting from time to time their opinion thereon, to state to the House the result of their inquiries into this the earliest, although perhaps not the most essential or most difficult object of their investigation.

The labours of Your Committee as to this branch of their inquiry, have been materially abridged and facilitated by the judicious measures adopted by the Irish government, for ascertaining, by accurate inspection, the actual state of those districts of the several provinces where this epidemic fever had most fatally prevailed; and they have been enabled, by the detailed reports of the respectable and intelligent members of the medical profession selected to perform this humane and valuable duty, to lay before the House more satisfactory information on this interesting subject than would probably have been attainable from any other sources. The liberality of the public had, in compliance with the recommendation of the Committee of the last Session been continued and increased, in aid of the voluntary contributions for relief of the diseased, and it was

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on every account most desirable that the Irish government who had thus dispensed the public bounty should be enabled to ascertain the effects, produced by the expenditure of the public and private funds for attainment of this great object under the provisions adopted by the legislature.

Your Committee therefore, have annexed these Returns of the medical Inspectors as an Appendix to this Report; which, with the tables accompanying them, will, they are confident, receive from the House that serious and considerate attention, which such documents so well deserve; and they venture to add that without a careful perusal of them, a very inadequate opinion will be formed of the extent of the calamitous pressure on the body of the people, and the great sacrifices and meritorious exertions of the residents of all classes for relief of the diseased. The reports on the provinces of Munster and Leinster, and particularly the cities of Dublin, Cork, Waterford, and Limerick, where the disease prevailed most extensively, and where the more general establishment of fever hospitals has afforded the means of more correct information, appear best suited to elucidate this interesting subject of inquiry.

The Committee consider the Act of last Session as only in the commencement of its operation, and cannot feel any surprise if a course of legislative regulations, in some parts novel, and enacted under circumstances of severe and calamitous visitation, has in some instances, and especially where imperfectly acted upon, failed to produce an immediate effect, or should have been sometimes misconceived, as to its tendency and the nature of its provisions: in this latter observation they particularly refer to the enactments respecting the establishment of a Board of Health, which, though guarded most scrupulously against any possible abuse of those great powers which could alone be efficacious in such extensive cases as it was calculated to meet, appear to have excited, in some parts, unmerited distrust and jealousy; whilst they have been acted upon in other places, Newry in particular, where they are stated to have produced the most salutary results.

Your Committee however consider themselves warranted in expressing a sincere and satisfactory conviction that the Act has been signally and powerfully effective in the attainment of its objects through many extensive districts of a country severely afflicted with disease: The remedial means pointed out by the Act, where fully adopted, have worked extensive good; and as they trust they will be still more powerfully efficacious as they are more generally acted on Your Committee considers itself in a great degree released from further immediate consideration of that branch of the subject.

The Reports of all the Inspectors, and accurate information derived from other most respectable individuals concur in the necessity of looking to the establishment of measures for the prevention of disease, and to securing the people of Ireland against its recurrence and increase, by assiduous and regular attention to cleanliness of the streets of the cities
and

and great towns, and ventilation and purification of the dwellings of the Inhabitants.

In this view Your Committee consider it of infinite moment that the necessity of local systematic and unpaid control should be impressed on the Inhabitants of all cities and great towns, where the assemblage of large bodies of people creates those nuisances which generate and increase disease; and have therefore sought out the means of calling into action parochial assistance in performance of those duties, as best suited to the object; being well satisfied, that appointments of that nature induce the most salutary and efficacious results of individual and collective exertion: in no case can we look to this exertion with more confidence, than when the health and comforts of the community are in question; nor at any time, than when that community having severely felt, and still continuing to feel, though in a lesser degree, the fatal consequences of past negligence, or the want of such provision, by the visitation of disease, will be disposed duly to estimate the value of such a regularly acting and established system. Under such circumstances, Your Committee venture, with some degree of confidence, to recommend certain Legislative Regulations, directed to this important object.

They have also adopted, but with some doubt as to its efficacious practical results, a suggestion, intended to prevent the migration through the country of numerous bodies of mendicant poor, who, pressed by distress and seeking for relief have fatally contributed to the general diffusion of disease. For this evil, to which the concurring medical Reports of the last and present year mainly attribute the extension of the disorder, it is most difficult to devise a remedy, which will not lead, in its consequences, to the establishment of a system of Poor Laws, that, in a country like Ireland, would produce incalculable evils to every class of the community.

The measure which Your Committee proposes, merely goes to confirm powers in the Magistracy which formerly existed, and to extend them to some other officers; but to render the pecuniary provision for the expenses incurred in their execution entirely dependent on the voluntary Contributions of Individuals, or local Public Communities.

Your Committee now proceed to lay before the House in detail, the Regulations, which they feel it their duty to recommend for the purposes aforesaid.

1. That in order to provide for and secure constant and adequate attention to the health and comforts of the Inhabitants of Ireland, and the prevention of contagious disease, more especially in the cities and great towns thereof, it appears requisite, that Officers should be annually elected by the Householders in all cities and great towns, containing above one thousand Inhabitants, and in such of the Parishes of the country as may think proper to adopt a similar measure; which officers shall be, during the year of their continuance in office, intrusted with full powers to direct all streets and lanes, and yards adjoining thereto, and houses let in several tenements to room-keepers, and the

yards connected therewith, to be cleansed, and all nuisances prejudicial to health to be removed therefrom, and to clear public sewers, and cover them where necessary, and to fill up or drain off all lodgments of standing water, and to cause to be done such works for ventilation and fumigation and cleansing of any house in which fever has occurred, and the washing and purifying the persons and clothes of its Inhabitants, as shall appear to them indispensably necessary for the preservation and security of the inhabitants of the parish; and that in all cities and great towns, as above mentioned, where the inhabitant householders shall neglect or omit to make such appointments for one month after the 25th of March in every year, it shall be competent for the Magistrates assembled in Quarter Sessions to make such appointment; and that all constables and other peace officers be empowered and required to be assistant to the said Officers of Health, when called upon in execution of their duty.

2. That such Officers of Health should be chosen in vestries parochially in all cities and great towns, and also in such country parishes as shall think it proper to adopt this measure, to the number of not less than two, or more than five for each parish, and shall act without salary; and that the expenses incurred in discharge of their duties enjoined by these Resolutions, the amount whereof shall not exceed such sum as the inhabitant householders shall, at the appointment of such officers, limit and direct, be levied by parish rate in such manner and form as the other parochial assessments are; and the expenditure accounted for in a similar manner; but at such periods of the year, and as often as the parochial meeting shall direct, by the said Officers of Health; and that copies of such accounts be transmitted annually to such public office or officer in Dublin as the Lord Lieutenant shall direct.

3. That in all cities and towns as aforesaid, where the sweeping of the streets and dung collected there is not already vested, or by any Act shall be vested in the corporate body, or where the scavengers or other persons intrusted by such corporate body with the care thereof, shall neglect or omit to exercise the powers intrusted to them, by cleansing the streets and lanes twice in every week at the least, after notice given of such neglect or omission by any inhabitant to the scavengers or other persons so intrusted, the dung and sweepings of the streets may and shall, in 24 hours after, be collected and sold by the said Officers of Health for the benefit of such parish, and accounted for in diminution of the charge incurred in execution of their several powers.

4. That any magistrate or churchwarden, or any of the officers so to be appointed, be empowered to remove out of their respective parishes any persons who shall be found begging or wandering as vagabonds therein, or to confine such persons to hard labour for 24 hours in any bridewell, or other public place of confinement, or to adopt both measures, as the case may require; and to cause the persons and clothes of such vagabond beggars to be washed and cleansed during the period of their confinement; and that the magistrates assembled at any quarter sessions, or adjournment thereof, be empowered to constitute any suitable unoccupied

occupied building to be a bridewell for the said purposes; provided that it be so appropriated and continued with the consent of the owner or proprietor thereof; and that it be earnestly recommended, that wherever public buildings exist, which are no longer necessary to be applied to the original object of their destination, they may be allowed to be used for the purposes aforesaid.

Your Committee having thus submitted their general view of this branch of the subject intrusted to them, and embodied the results in the foregoing Regulations, are proceeding, in farther execution of their duty, to inquire how far it may be practicable to ameliorate the condition of the Labouring Poor, by facilitating the application of the Funds of private individuals and associations, for their employment in useful and productive labour; by which alone Your Committee feel themselves warranted to expect the entire and permanent removal of a malady, which, although much mitigated in its severity, and more circumscribed in its extent, still continues to press heavily on the community, and which the united testimonies of every competent inquirer attribute to the want of employment of the labouring classes, as a primary and powerfully efficient cause.

17 May 1819.

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A P P E N D I X.

— I. —

A REPORT ON THE STATE OF FEVER IN THE
PROVINCE OF MUNSTER.

THE insertion of the following letter, received from Mr. Secretary Grant on the 13th of February last, appears to me requisite to explain the objects of my mission, and the means which I have adopted to fulfil its several duties.

Dublin Castle, 12th February 1819.

HIS Excellency the Lord Lieutenant having been pleased to appoint Doctor Francis Barker, as a temporary medical inspector for the province of Munster, for the purpose of ascertaining, by inquiry to be made by him on the spot, the exact state of Fever throughout the province, with the view of submitting in detail for His Excellency's consideration, such medical or preventive measures, (in addition to those now employed,) as might in his judgment prove the means, not only of relieving the persons affected with contagious fever, but of checking its further progress in their several dwellings; I have to communicate His Excellency's anxious desire and confident expectation, that magistrates of every class, the clergy of all persuasions, and the several respectable persons who superintend and execute the arduous and useful duties of governors and medical attendants on the fever hospitals and dispensaries which have been established throughout the province of Munster, will be pleased to afford their best advice and assistance to Doctor Barker, for the purpose of enabling him to discharge the important trust committed into his hands, with benefit to the country at large.

(Signed) *Charles Grant.*

HAVING received the commands of His Excellency the Lord Lieutenant, to act as a temporary medical inspector for the province of Munster, I proceeded, conformably with my instructions, to ascertain by inquiry made on the spot, the exact state of fever throughout five counties of that province; and I now submit for His Excellency's consideration the several results of my inspection, together with such medical and preventive measures, (in addition to those now employed), as may in my judgment prove the means, not only of relieving the persons affected with contagious fever, but of checking its further progress in their several dwellings.

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To discharge this important trust, I addressed myself to those gentlemen who, from official situation as magistrates or clergymen, or from connection with various fever hospitals or dispensaries, were likely to afford accurate and satisfactory information; and the substance of the following Report has been framed from a comparison of the separate statements of numerous individuals in the same or in different parts of the province; from visits to the different establishments receiving patients in fever, and in almost every instance from personal communications, carefully noted down at the time. The several inspectors employed on this occasion, had judged it expedient, previous to their setting out on their mission, to decide upon and methodize the different subjects connected with this inquiry. These have been arranged under the following heads, in the form of *Queries*, and in the order which I propose to observe in this report.

1.—HAS Fever prevailed in does it now prevail; and is it increasing, stationary, or decreasing?

2.—Is there any district in this neighbourhood where it has not prevailed, or any class of people among whom it has not showed itself; and if so, what peculiarities in their habits or modes of living have been observed.

3.—WHEN did this epidemic fever first appear? at what time was it most prevalent and fatal; and what proportion does the number of those who have been attacked, bear to the whole population?

4.—WERE any remarkable circumstances observable in the state of the people in this place, when fever first made its appearance among them?

5.—DOES it differ from the ordinary fever of this country, and has any change in its character taken place; and if so, at what time?

6.—WHAT means have been employed to counteract it, and with what success? are there any districts in this neighbourhood unprovided with medical aid?

7.—WERE relapses frequent; and if so, during what times since the commencement of the epidemic? did the disease often recur in the same individual at distant periods; and if so, from what causes.

8.—WHAT effects did it produce on the constitutions of the sufferers?

9.—HAS it extended through families; or from the sick, to the medical or other visitors or attendants.

10.—CAN accurate returns, in periods of twelve or six months, or monthly, of the numbers admitted, cured, and died in hospitals, or of those who sickened and passed through the disease in their own houses, be supplied?

THE Facts resulting from Answers given to the preceding Questions, together with such collateral information as appeared to be connected with the subject, are stated for the different counties in this order:—Waterford, Cork, Kerry, Limerick, and Tipperary; and this division has been adopted because the soil and situation of the different counties, and the habits and circumstances of their inhabitants are so distinct, that such varieties of the epidemic fever might be expected to exist, as would, on comparison, afford information as to the progress of disease, and the means best adapted for its prevention.

*County of Waterford.*1
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Waterford.

IN the county of Waterford, various places were inspected, particularly those where fever had been most prevalent, including Waterford, Dungarvan, Cappoquin, Lismore, Tallow; where, from the establishment of fever hospitals, most information was likely to be obtained. Various particulars were also learned as to the state of fever in Kilmarthomas, Tramore, and other small towns situated on the adjacent sea coast.

1.—In Waterford, fever had for some time prevailed in a very considerable degree, and at the period of my visit seemed to be increasing; but this apparent increase was attributed by most well informed persons to an active inspection of the city, lately instituted by the medical gentlemen, with other benevolent individuals, and consequent reception into the hospital of many patients in fever, who but for the visits of the inspectors, would have remained in their own dwellings.

The hospital was crowded in an extreme degree; and it had been just resolved to extend the accommodation, and to appropriate some of the wards in the contiguous city hospital to the reception of fever patients. The great prevalence of fever at this period will become evident on inspecting the return No. 1. from which it will appear that the number of patients in hospital on the 20th of last February exceeded more than four times the number at the latter part of 1817. It is satisfactory to state, from information lately received, that the disease has now considerably decreased in Waterford, and that the patients admitted to the hospital during the last week of March did not in number reach exceed one-third of those admitted during the same period, at the commencement of last January.

2.—In some of the smaller towns contiguous to Waterford, fever had also prevailed, but as I was credibly informed, it was on the decline; and in Tramore and its vicinity, which had also been visited by this malady, there was not a single case of fever at that time.

This epidemic fever seemed to have first showed itself at Passage, a small seaport town near to the mouth of the river Suir, about the end of the year 1816, or the beginning of 1817. In the month of February of the latter year, it was very prevalent in that town, and little doubt can exist of its prevalence in this quarter, and at Waterford, before it made its appearance in more inland places situated to the west of this city.

From the reports of fourteen medical gentlemen, and other well informed persons, it was satisfactorily proved that fever had prevailed in every district around the city, and that no class of people had been altogether exempt from its attacks, although its prevalence had been much greater in the lower than the upper classes of society, among whom at that time no case of fever was known to exist, although about twelve months previously, and during last summer, it had appeared occasionally, and as in most other places where it attacked the rich, had been attended with consequences proportionally much more fatal. By the returns of the fever hospital at Waterford, it is proved, that during the months of December, January and February last, little more than one in sixteen had died of fever; but among the better ranks in that town and its neighbourhood, the fatal cases had constituted at least one-fourth of the total number attacked. The infrequency of fever here observed among the class of society in comfortable circumstances, is attributable to the superior cleanliness and ventilation of their dwellings, their more frequent ablutions and changes of apparel, and seclusion from those by whom infection is most frequently communicated. Little or no fever had appeared among the society of Quakers, probably from the same causes, operating in a higher degree. That seclusion exerts a strong preservative influence, was exemplified by facts derived from unquestionable authority. In the charity school of Killoternin, about three miles distant from Waterford, containing fifty-six boys, no case of fever had occurred, either during the last summer or since that time, when the disease was so prevalent in Waterford and the immediate vicinity of the school. The master had received particular directions to prevent all communication with the town or surrounding neighbourhood; these directions had been carefully observed. A fact of a different kind, by showing that comfortable circumstances and cleanly habits are alone insufficient to confer security, without a certain degree of seclusion,

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tends to confirm its preventive efficacy: many of the inferior classes, such as farmers, and others, whose circumstances were tolerably comfortable, and habits cleanly, suffered considerably from fever, arising most probably from their more frequent and continued intercourse with persons in the lowest rank, amongst whom it was chiefly prevalent.

3.—JUDGING from the annexed return of the fever hospital, we might be led to infer, that fever had begun to prevail epidemically in Waterford during the summer of 1817, as its chief increase was manifested at that season; but the concurring reports of various medical gentlemen, referred its commencement to the end of 1816, or January 1817. From that time it had advanced progressively; and had been most prevalent and fatal at the period of my inspection, and during some months antecedently.

To ascertain precisely the proportion which the number seized with fever, bore to the whole population of Waterford, was scarcely possible, as many persons were received into hospital from the adjacent country, and many also must have remained in their homes unnoticed; but supposing the number of such patients to be nearly equal, estimating from a comparison of the returns of the fever hospital and the total number of inhabitants, the sufferers from fever cannot be rated at less than one-ninth of the whole population. In a part of the city named the Carrigoen, inhabited by the poorest and most miserable classes, there are good reasons for believing that nineteen persons in twenty at least have suffered from fever; and in Murphy's-lane, containing sixty houses, every inhabitant has had an attack of fever within the last two months.

4.—THE circumstances of the people at the time of its first invasion, were in many respects peculiar: poverty was extreme; in consequence of the failure of the crops in the year 1816, scarcity had prevailed to a degree almost amounting to famine; the seasons were most unusually humid. With these evils, want of employment, arising from the change from war to peace, and the failure or deficiency of manufactures, contributed in a high degree to increase the distress. The manufacture of stuff, which formerly was pretty extensive, has of late years greatly declined. One of the inspectors of the convalescent committee had very lately visited many of the weavers rooms, in all of which he had found but one loom at work.

The slaughtering of beef, from which the poor inhabitants derived some assistance, has also ceased. The miserable consequences thus arising from the concurrence of scarcity with want of employment, far exceeded all former example; for, in the year 1801, scarcity alone operated to produce distress. A physician to the public establishments in this city, informed me that he has frequently detected healthy men endeavouring to alleviate the pains of starving by lying in bed during the greater part of the day, in a state of reckless dependency.

The great neglect of cleanliness among the lower classes, a necessary consequence of extreme poverty, was stated also as a powerful cause for the spreading of febrile contagion.

5.—It may be proper to mention, that the fever did not materially differ from the ordinary kind which so generally prevails in Ireland. In the course of last autumn it was attended by dysentery, which proved remarkably fatal to the inhabitants of this city; three hundred persons, including some of the better ranks, having probably become its victims.

6.—IN Waterford, which in this country first set the example of instituting an hospital for the reception of fever patients exclusively, in connection with other parts of the preventive system, it might be expected, from the humane activity of its managers, that extraordinary efforts would have been employed to oppose the progress of disease: the sick were removed from their dwellings to hospital; the rooms whitewashed, and clean straw supplied to the remaining family; and as ventilation was in many instances found to be defective, in some houses of the densely populous lanes, openings were made, when it could be done, to admit fresh air and diminish the noxious effects of the concentrated effluvia: the articles of dress made of linen, belonging to patients admitted to the hospital, were washed and exposed to the fresh air; private contributions for the support of the hospital, were most liberal, and aid was obtained from government by the advance of different

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*Beneficial effect of
a Fund established
at Waterford.*

sums on several occasions : but as these exertions, though great and unprecedented, proved ineffectual completely to arrest the progress of disease, additional measures were employed, which deserve attention. A Fund was established for the purpose of affording relief to the families of all persons received into the fever hospital, and nourishment to the convalescents from fever on their return to their dwellings ; and also for cleansing the houses and clothes of the infected : a commodious house (the gift of a member of the corporation) has been fitted up with cisterns and boilers for washing, and a kiln for drying and fumigating the infected clothes and bedding : children left destitute by the removal of their parents to the hospital, or those who have not changes of clothes, are received into the house to undergo the operation of cleansing : notice is received there of all fresh cases of apparent fever, and lists are sent every morning from the fever hospital, of the persons admitted or dismissed on the preceding day : the city has been divided into districts, to each of which a physician and three other visitors, members of the committee, are allotted. The physician examines the applications of the sick to this house, visits the applicants, and should he find it necessary, sends them to the fever hospital : the other members of the district committees visit the patients dwellings, and see that all the measures of purification, consisting of whitewashing, burning fuel, and supplying new straw, and cleansing the person and bedding of the infected families, have been duly performed ; soup and fuel are also distributed to poor families when in a state of convalescence, as circumstances may require : but the success of the plan has not yet been decisive, though no doubt can exist that distress must have been greatly alleviated, and much sickness prevented by its humane operation.

The districts around Waterford, in the county, are in general unprovided with medical aid, except such as can be obtained from the city, with the exception of Tramore, where a physician resides.

7.—THE distress arising from this epidemic fever, has been much increased by the frequency of relapses, which have happened chiefly within the last four months : of 2,700 patients admitted to the hospital in the year 1818, 700 at least were either cases of relapse, or of a recurrence of the disease after some interval of time. Many patients relapsed several times, and such attacks were often severe ; they were attributed to want of wholesome nourishing food, and of clothing and bedding, and to the neglect of cleanliness in the persons and apartments of the poor. It was reported that relapses were not so frequent in some parts of the country adjacent to the sea coast, as they had been in Waterford.

8.—No extraordinary effects on the constitution, with the exception of debility, seemed to follow the attacks of fever ; and this, as might be expected, was most remarkable after relapses.

9.—AMONG the poorer classes, living in apartments crowded and ill ventilated during the whole night and great part of the day, and thus exposed to the effluvia proceeding from the sick, the disease has been observed very generally to extend to all the individuals of a family ; seven or eight persons from the same rooms have frequently been admitted in succession to the hospital ; but in the upper classes of society, such extension of fever through the members of a family was rarely observed. The circumstances of the rich will account for this immunity : their apartments are better ventilated than those of the inferior classes ; and they are not, as the poor, exposed during the night, when the system is probably most susceptible of the influence of contagion, to its impression, continued during many hours, in small rooms ill ventilated, and favouring its propagation by neglect of every kind. Cleanliness in the persons and apartments of the richer classes, also contributes to their security ; nor should we omit the superior dryness of their dwellings, as there is some reason for supposing that damp air acts as a vehicle of contagion ; it is also probable that the more liberal use of animal food among the richer classes, by invigorating the system, may contribute to their security. On these principles may be explained the fact, that the troops in the garrison of Waterford have been healthy when fever raged in that town and its vicinity ; and that ninety non-commissioned officers of the Waterford militia staff have suffered but little from fever during the last three years, though following their trades in different parts of the city. Of the medical attendants, not one in this city has suffered from this disease, though engaged occasionally in attendance on the fever hospital ; two of them had a severe attack of dysentery, a disease, by some physicians, considered to be closely allied to fever.

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The housekeeper, nurse-tenders, and servants at this hospital have suffered severely, few having escaped the sickness, particularly during the last summer; and in two instances the termination was fatal: seventeen have been attacked within the last fourteen months; and of these, four have suffered two or three relapses. Here it would be injustice to pass over unnoticed the fearless intrepidity displayed by the members of the committee and medical gentlemen in their attendance on the hospital, which, at the time of my inspection, was so crowded, that in some of the wards the patients lay in three rows, and many of the beds contained two patients labouring under fever. In these circumstances the physicians continued their daily visits; and gentlemen of the town, managers of the institution, did not hesitate to enter wards which, accustomed as I am to attendance on fever patients, I could not remain in without some feelings of apprehension. This generous sacrifice of their personal safety is no longer necessary; more ample accommodation having been since that time provided. The extension of fever among the attendants at fever hospitals, will in the sequel appear to have been an almost universal occurrence in this part of Ireland. The return (No. 1) from the hospital, will show the progress of fever in Waterford, and the magnitude of those exertions which have been made for its suppression; but it is proper to observe, that the great assistance rendered by the "Convalescent Committee" to the families of patients, when received into hospital, has lately contributed to crowd its wards with cases of a slight nature, and to interfere with an exact comparison of this with other parts of the province, where less active measures have been employed or deemed to be necessary.

1.—In other parts of the county, including Dungarvan, Cappoquin, Lismore, Tallow and Kilmacthomas, fever seemed to be much less prevalent than in Waterford; and although in these places there had been an evident decrease, which seemed more permanent than on former occasions, still the disease did not appear altogether subdued. It had occurred in most districts within some miles around the above mentioned towns, but at different times. Thus in the parish of Rineagannah, the inhabitants had no fever when it raged in Dungarvan, though the malady has since reached them.

2.—Instances of exemption, worthy of remark, also occurred. Thus it did not prevail at Ballinavella, Kilmacragga, and the two Bridanets, plough lands in the neighbourhood of Lismore, owing, as it is stated, to advice given by the roman catholic clergyman to the inhabitants of these places not to frequent Lismore or Tallow. Its attacks, as in Waterford and the immediate neighbourhood of that city, had not been confined to the lower classes, although crowding of apartments, defective ventilation, neglect of cleanliness, and the other consequences of poverty, were found to be as effectual here as in Waterford, in favouring its progress. At Cappoquin, fever was stated to have begun with the better ranks, and proceeded from them to the poor.

3.—The first increase of fever in Lismore, took place about November 1817, and it was most fatal in last September and October. It had appeared at Ballyduff on the south side of the river Blackwater, about twelve months ago: a person resident there, who died of fever, had bequeathed his clothes to an inhabitant of the opposite side of the river; and soon after this event, the disease spread through the family into which the clothes had been received. Here it proved more fatal at its first appearance than subsequently, and continued, from its commencement at Ballyduff, during eight or nine months at both sides of the Blackwater.

4.—Deficiency of fuel, arising from the wetness of the years 1816, 1817, was frequently assigned to me as a cause for the spreading of fever amongst the poor at that time. Turf or peat, the ordinary fuel in most inland parts of the country, could not be dried and brought home in a state fit for use: this must have occasioned a perpetual dampness of the clothing and apartments of the poor, debilitating their constitution, rendering the air of their dwellings more noxious by diminished ventilation, arising from the want of a fire burning within the due; thus in various ways favouring the influence of contagion.

Poverty and its consequences in this, as in other parts of the county of Waterford, attended the commencement of fever; and the distresses of the poor have been much increased by the failure of the fishery, which occurred about the time when the disease

disease became epidemic, at Dungarvan and other parts of the adjacent sea coast. At this period, several of the fishermen had become beggars.

Strangers were supposed to have introduced the disease into Tallow, as they resorted there in great numbers at the time when fever commenced. It is supposed that one-third part of the population of that town, suffered in some degree from fever.

5.—THE progress of fever in this part of the county of Waterford, resembled that of the city and its vicinity. It had in general become milder, and also of shorter continuance; a strong indication of diminished severity, though not of lessened contagion.

6.—THE preventive means used in this quarter of the county, were similar to those already stated. Temporary fever hospitals had been erected, supported by private and public contribution, also by aid from government, and exertions great and generous were employed to prevent the extension of disease. A measure of relief pursued at Cappoquin, deserves mention: the distribution of clothes, in cases of great distress, by a charitable society instituted for that purpose; the miserable condition of the poor rendering such relief peculiarly necessary, and obviating a frequent cause of fever. The benefit of such societies is not limited to the relief they afford; they disclose the condition and wants of the poor to the upper classes; and thus approximating the different orders of society, tend to give them a community of interest and feeling.

7.—RELAPSES were very frequent in every quarter of the county of Waterford, and greatly augmented the distress.

8.—No peculiar effects on the constitution, were observed to result from its attacks.

9.—ITS contagious nature was more strongly evinced in this, than in the eastern part of the county; for it not only spread through whole families, but several clergymen, both protestant and roman catholic, and some physicians, were attacked. In the hospital at Lismore, every nurse-tender had suffered, and some of them gave up their places from apprehension. The physician was also a sufferer; and some of the clergy, protestant and roman catholic, in the neighbourhood of Tallow, died of fever.

From a review of the different reports obtained in this county, it results that fever, with scarcely an exception, has prevailed in every district, commencing not exactly at the same time in different places, but at a period generally corresponding with the distresses arising from the scarcity:

Observations

That in this county it is by no means subdued, although its frequency has been progressively diminishing, and its severity is in general mitigated:

That the evils resulting from it, have been greatly enhanced by relapses:

That its contagious nature has been strongly evinced by its almost universal extension among the nurse-tenders in hospitals, and the attacks of fever which have occurred among the physicians and clergy engaged in the duty of attendance on the sick:

That the preventive system, in all its details, is now very actively pursued in the town of Waterford, where the disease still appears to be prevalent to a greater degree than in other parts of the county.

Preventive System.

County of Cork.

IN the county of Cork, such places were inspected as were judged likely to afford satisfactory information relative to the prevalence and character of the epidemic fever, and the means which had been adopted to restrain its progress.

County of Cork.

The great extent of this county, and the sufferings which its inhabitants have undergone, claim for it peculiar notice; but to avoid useless repetition, reference will occasionally be made to the statements contained in the report on the county of Waterford.

1.—FROM the low and damp situation of Cork, and the injury which its dense population must have sustained by the change from war to peace, it might be expected

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expected that epidemic fever would there have made great progress, more especially when rendered active by bad seasons, giving rise to scarcity amounting almost to famine; accordingly fever has prevailed to a most extraordinary extent. The number of patients who passed through the fever hospitals in the year 1815, amounted to 726; in 1816, these rose to 995; in 1817, to 4,617, and in 1818, to the enormous amount of 10,228: so that in the two last years, a number of patients exceeding one-seventh of the population of Cork, estimating this at 100,000, has passed through the different fever hospitals of that city. Such was the increase of fever patients in the year 1817 and part of 1818, that two additional hospitals were required to accommodate all the applicants labouring under fever: these hospitals have since been closed; the last of them at the period of my inspection, on the 1st of March 1819.

It is most satisfactory to report from various concurring testimonies, as well as from returns obtained from the hospitals, that fever has so much declined in Cork, as to render it questionable if the disease be now more prevalent than it has been in ordinary times; no doubt however can exist that fever still prevails in Cork, but probably in a degree little exceeding its usual frequency in the populous towns of this county; and its progressive decrease, as indicated by reports from the hospitals, is universally acknowledged.

2.—It would seem to have prevailed in Cove, a small sea-port town near the mouth of the harbour, and seven miles distant from Cork, at an earlier period than in this city; and it deserves remark, that in two places so similarly circumstanced as Cove, and Passage near to Waterford, fever should have made its appearance at an earlier date than in either of these cities.

No district in the vicinity of Cork had been exempt from fever; and its progress seems to have been pretty similar to that observed in other places in this province, visiting the upper classes with great severity, and at its commencement proving very mortal, but almost totally ceasing among them in proportion as its frequency increased among the poor.

3.—ITS commencement was generally referred to the latter part of 1816, or beginning of 1817. It increased manifestly in the spring of 1817; when the beds, which had been hitherto sufficient for the fever patients of the town, were found unequal to the demand, and a greater number were provided.

4.—GREAT scarcity and bad quality of provisions; increase of failures in trade, owing to the transition from war to peace; mendicants flocking to the city, and the needy in general crowding thither in search of employment, were the awful circumstances marking this eventful period.

5.—DYSENTERY, which showed itself in the course of last autumn, did not appear to have been so prevalent or fatal here as in Waterford, and the fever had changed its character and become milder.

6.—THE preventive means were pursued most actively; patients were received into hospitals, where every advantage to be derived from such establishments was obtainable; whitewashing, ventilation and fumigation occasionally were employed in the dwellings of the poor; the clothes of the patients received into hospitals, were ventilated or steeped in cold water; the bedding and clothes of the family remaining at home were not washed, but clean straw was supplied, and the old straw bedding occasionally destroyed; coals were also given to some poor families; soup also had been distributed to aid the distressed, and promote the recovery of convalescent patients: fever has declined almost within its ordinary limits; and the benevolent promoters of the measures so actively pursued for its suppression, have the satisfaction of reflecting that their dearest relatives, friends and fellow citizens, are no longer threatened by the visitation of this awful calamity.

7.—RELAPSES occurred very frequently; at one hospital it appeared that a large proportion of the patients dismissed, returned in a relapse of fever. This took place during the summer months, and among the lower ranks almost exclusively.

8.—THE effects produced on the constitution of the sufferers from an attack of this disease, were not different from those observed in Waterford.

9.—ITS

9.—Its extension through families was a very general occurrence among the poor, and was not very infrequent among those whose circumstances were comfortable, if cleanliness and ventilation had been neglected; but it rarely spread among the upper classes. Nine physicians, eight of them engaged in attendance on the poor in different establishments, were attacked, and of this number three died; these unhappy events occurred in the year 1817. Every medical person, including two apothecaries, connected with the South Fever Asylum, had an attack of fever; the apothecaries to such institutions were general sufferers: the nurse-tenders, who in the performance of their duty were greatly exposed to infection, also suffered; the greater number had attacks of fever, and some became its victims. Other persons engaged in various offices with the sick, the fumigators of the houses, and barbers of the hospitals, were attacked, and it was evident that persons occupied with attendance on the sick poor at that time, suffered in a degree of frequency much exceeding that observed in any other class of people not similarly exposed. The only cause to which this could be assigned, was the contagious nature of the malady; for in ventilation, cleanliness and general arrangements, the hospitals were not merely unexceptionable, but in many respects deserving of imitation in other places.

In several of the public establishments, the foundling hospital, dépôt for convicts, and gaol, few or no cases of fever then existed.

In the latter place, five cases of fever had not occurred from the commencement of the year 1817 to last August: this was attributed, and apparently with good reason, to the practice which had been adopted, on the admission of the prisoners, of washing and cleansing their persons, substituting a clean gaol dress for their own clothes, which were exposed to heat in a stove or oven, steeping the bedding of all those who were unusually filthy in bleaching liquor, and lastly, exposure to the process of stoving. Two prisoners had died of dysentery, but none of fever.

The practice of supplying gaol dresses has been discontinued, and some prisoners have sickened with fever, and a few patients of this kind were in the hospital at the time of my visit. The gaol was crowded to a greater degree than usual, and it had generally contained between three and four hundred prisoners.

Strong facts were stated to me on the existence of various nuisances, some of which I witnessed; and I was informed by the best authority, that one place where a number of lanes intersect, was in such a state from disease and filth, that some of the physicians more than once declared it to be quite unsafe for them to visit there. Deposits of filth and putrifying animal substances are suffered to remain in the crowded parts of this city; and I was informed that the powers vested in magistrates as to nuisances were insufficient, as the dung is the property of those who collect it, and cannot be removed without a tedious law proceeding, which the proprietor by various contrivances can evade. This evil requires a remedy; for whatsoever opinion may be entertained as to the power of animal effluvia to generate fever, no doubt should exist that air tainted and impure, debilitates the human system and favours the progress of contagion; and this may contribute with other causes, at all times, to maintain fever in the large cities of this province, where such nuisances are too much neglected.

1.—In other parts of the county of Cork, the progress of this epidemic fever was similar to that observed in the city. At Cove, which previous to this time had not produced four cases of fever annually in a population of about 7,000, the increase of disease had become so great that it was deemed advisable to fit up a number of huts for the reception of fever patients. It seemed here equally contagious as at Cork, spreading through families almost universally; and it was observed of one house, that every family that occupied it as a dwelling during two successive years was attacked with fever. It extended to the attendants at hospitals: a physician, one of the apothecaries, and some of the nurse-tenders, were seized with the disease, and one of the latter died. It may be right to mention that soldiers, ill of fever, are landed from the transports and received into the military hospital at this place, and that six patients in fever had been admitted from the transports within the last month. In this island fever has greatly abated, or is now very little prevalent.

In other places of this county, Kinsale, Bandon, Fermoy, Mallow, Mill-street, Castle Martyr, Middleton, and Youghal, its progress was very similar to that

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observed in Cork; commencing at various periods after the wet season of 1816, prevailing in every district around these places, chiefly among the lower classes, but not altogether limited to these, but occasionally visiting individuals in better circumstances; and in this class it prevailed most at its commencement, and with severity and danger proportioned to their elevation in society.

2.—According to several reports, situations damp and elevated seemed to favour its progress. Thus in a mountainous track near Rathcormuck and Watergrass Hill it was extremely prevalent: in one family eight persons were attacked, and of these four died. In the neighbourhood of Bandon also it was said to have prevailed with most frequency and severity in situations damp and mountainous. Here it may be remarked, that in some instances it appeared to have been less prevalent, and generally to have declined more rapidly in places where the subjacent rock consisted of limestone, than in those differently constituted. Thus in Copestown, in the neighbourhood of Mallow, fever was reported to have been much less prevalent than in any other place in that neighbourhood: it is elevated and exposed, and built over limestone.

Judging from the accounts of different medical gentlemen, from hospital reports and inspection of the patients, I would infer, that in all the above mentioned places and surrounding districts fever had considerably declined; that the decrease for some time past has been progressive, and does not resemble those fluctuations which have occurred during its former course. At Mallow, Fermoy, Kinsale, Bandon, and Youghal, it might be said in general to have approached its ordinary limits; in other places it had almost totally disappeared: thus at Middleton the temporary fever hospital had been closed, and not a case of fever was said to exist within four miles of that town.

3.—As to the time of its first appearance in different parts of the county of Cork, this was referred, according to different testimonies,

In Bandon	-	-	-	to Spring 1816.
Fermoy	-	-	-	Uncertain.
Cork	-	-	-	Summer of 1816.
Cove	-	-	-	September 1816.
Cork	-	-	-	October 1816.
Mallow	-	-	-	October 1816.
Bandon	-	-	-	January or February 1817.
Youghal	-	-	-	Midsummer 1817.
Castle Martyr	-	-	-	Midsummer 1817.
Middleton	-	-	-	Beginning of 1817.
Cork	-	-	-	Spring of 1817.
Bandon	-	-	-	Spring of 1817.
Mills-street	-	-	-	Spring of 1817.
Kinsale	-	-	-	Later than other places.
Skibbereen	-	-	-	Spring of 1817.
Fermoy	-	-	-	Spring of 1818.

Now from a collation of these testimonies, if we reject those which appear to differ much from the rest, it will follow that fever began to prevail epidemically in the county of Cork early in the spring of 1817, or the winter of 1816—1817; and as to the variations which appear in the different statements here given, I would only observe, that it is difficult to fix exactly the time when a fever begins to spread epidemically in a country which is constantly infested with this disease; more especially in places where there are no fever hospitals, or records kept of the number of cases. At Youghal and Kinsale, somewhat similarly circumstanced, and places of little resort, it seems to have commenced later than in other parts of the county. A census of the population in Youghal was taken in March 1817, at which time it was found quite free from fever; but the commencement of epidemic fever seems evidently connected with the great movement which took place in the county on the first impressions arising from scarcity.

4.—THE circumstances of the people at its commencement were generally stated to be such as are already mentioned in the reports of Cork and Waterford. Scarcity of wholesome food, combined with want of employment, extreme poverty, and wretchedness, great despondency; and in towns, defective ventilation of dwellings,

lings, and general neglect of cleanliness, were almost universally assigned as the condition of the inhabitants of the county of Cork at this time. But a few years ago, the fishermen of the town of Kinsale were never known to become mendicants; now they are often reduced to this necessity: the fishery on this coast, as at Youghal and Dungarvan, has been less productive than formerly. In some places, toward the west side of the county, the influx of strangers and mendicants was more dwelt upon than in other parts: thus, at Mills-street, it was stated that crowds of half-starved wretches, joined by the idle and ill disposed, passed through the county, seizing on potatoes and meal; and such was the violence of their importunity for food, that the distribution of soup became almost a service of personal danger. The number of strangers and mendicants who resorted to the western parts of the county of Cork, bordering on the county of Kerry, was extreme. The Kerry labourers, and many of the people west of the town of Bandon, emigrate during the season of harvest, and their wives and children at these times generally become beggars. The increase of this evil must have been enormous at the time of scarcity, and amongst a people with whom emigration and mendicity are annual habits; and must have contributed powerfully to extend fever through a population unemployed, debilitated, despondent, and in every respect susceptible of impression from this calamity.

5.—THE disease was, in general, reported to be either similar to the ordinary fever of this country, or to be merely a variety of this disease, modified by the peculiar circumstances of the people at the time of its invasion. At Mallow, deaths in the hospital were occasioned chiefly by a disease allied to dysentery, which proved at least as mortal in this place among the poor as in Waterford.

6.—THE preventive means employed in the large towns were similar to those adopted in Cork. Hospitals were prepared on a scale accommodated to the size of the town and the means of its inhabitants: for their support, the contributions were in many instances large and generous, and the aid of government was occasionally given: places already built were often applied to the purpose; and in some instances, buildings of the rudest construction, with walls composed of turf-soads, were fitted up for the accommodation of the sick. Such was the conviction the poorer classes felt of the necessity of the separation of the sick from their families, that in some instances they erected huts by the sides of the fields, to which they removed those who sickened with fever; for the spreading of this disease was always apprehended, because it was an almost universal consequence of its appearance in a family.

7.—Relapses were frequent in every part of the county, without exception, but among the poor chiefly or exclusively; most commonly during the year 1818, and in proportion as the disease assumed a milder form.

8.—It extended through the families of the lower ranks very generally, as in other places. This was the invariable report at Youghal, Castle Martyr, Middleton, Bandon, Kinsale, Fermoy, Mallow and Mills-street; and sometimes it appeared to spread among those in better circumstances. At Fermoy the postmaster's wife and three children had an attack of fever; and in about two months after this event, he sickened and died. Six medical men were attacked with fever in the neighbourhood of Fermoy and Mallow, and two of them fell victims to it. The nurses and inferior attendants at fever hospitals suffered very generally, as well as other persons employed about these establishments. In some parts of the county of Cork, bordering on the county of Kerry, it was reported that one-half of the population only, and that in others scarcely one-third had remained exempt from an attack of fever.

County of Kerry.

THE circumstances of the county of Kerry were peculiarly favourable to the progress of fever; remote from large towns, and deprived in too many instances of the advantages which result from resident landholders, its sufferings were not perhaps exceeded by those of any other county in the kingdom.

County of Kerry.

1, 2, 3.—THE time of the first appearance of fever, its greatest prevalence and mortality, corresponded nearly with the accounts received in the county of Cork;

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hut at Dingle and its neighbourhood it was reported to have appeared at a much later period than in other parts of the county of Kerry; and there was no fever there in August and September 1817, when extremely prevalent in other places. This was to be accounted for by its superior advantages over other parts of the county, arising from the linen trade and the fisheries; but something should also be attributed to the remote and insulated situation of the place.

4.—THE condition of the people in this county greatly furthered the progress of disease. This may be inferred from the following report of their circumstances at the time when fever became epidemic: fuel scarce and dear; farmers generally failing, in consequence of the change from war to peace; beggars passing through the county in crowds, seizing on provisions; great deficiency of employment, and scarcely any manufacture in their towns; the want of food so pressing in the neighbourhood of Tralee, that seed-potatoes were taken up from the ground and used for the support of life; nettles and other esculent wild vegetables eagerly sought after to satisfy the cravings of hunger; influx of strangers to such a degree that it was emphatically said, "the whole country was in motion," and female mendicants, often carrying about children suffering from fever in their arms, and it was reported to me that a husband, wife and five children, were seen walking in the streets of Killarney, all labouring under fever. Spreading of disease under such circumstances was inevitable, and its progress was furthered in no small degree by general despondency, and by neglect in the persons and dwellings. It extended through families almost universally; and such was the conviction of its contagious nature, derived from sad experience, that the ties of family affection were in some instances dissolved, and the nearest relatives, when seized with the disease, were forced out of the cabins into huts generally placed by the road side, to prevent infection and obtain charitable relief: this was, I believe, most liberally supplied; for it is but justice to declare, that the resident gentry were feelingly sensible to the distresses of their countrymen, and disposed to render them every assistance which their means could afford. It has declined considerably in this county, as would appear from the reports received at Tralee, Killarney, Tarbert and Listowel; but cases of fever among the poor still present themselves at Tralee and Killarney; and at Dingle in the parish of Ventry, where the population is dense, there are still a good many cases of fever. In the neighbourhood of Listowel and Tarbert its frequency has considerably diminished.

5.—THE fever was very generally stated to have been more frequently attended with petechiæ, or spots, than usual; a remark which has been made in most parts of this province. Its character has been in general changed throughout the county, and it has assumed a milder form; but at Tralee cases of a severe kind had been admitted to the fever hospital within some weeks past.

6.—THE preventive means seemed to have been employed on a more contracted scale in this than in other counties. Medical aid was reported to have been wanting in many districts; Kenmare, Castle Island, Kilorglyn and Ivragh, were said to be destitute of such assistance, and hospitals for the relief of fever patients were but thinly scattered throughout this county.

7.—As in other parts of the province, the distress was much aggravated by the frequency of relapses occurring, from the time that fever first made its appearance.

8.—THE constitutions of those who recovered did not appear to have been injured. At Killarney dysentery was combined with or succeeded fever in some instances; but it did not there produce fatal consequences, as in other parts of the province.

9.—THAT it extended itself through families of the poorer classes has been already stated. The medical and other attendants on the sick have been severe sufferers; and it was observed to spread occasionally through families in comfortable circumstances also, in cases particularly where defective ventilation of the dwellings was observable: at Tralee, it was reported by an eminent physician, that in a respectable family living at the distance of about twelve miles from the town, in a period included between the 1st of December and 16th of March 1817, twelve persons had been

been attacked successively with fever. It was supposed to have been conveyed by servants, labourers and beggars, to the houses of the upper classes. The nurse-tenders in the hospitals of Tralee and Killarney suffered without any exception, and the physicians received the infection in a proportion far exceeding that observed among other persons in the same rank of life. At Tralee, of nine medical gentlemen who might be considered as peculiarly exposed, four were attacked, and two became victims of the disease: at Killarney, five out of seven of the medical gentlemen sickened; two of these had severe illness: thus it appears that of sixteen medical persons, nine were attacked and two died; an occurrence proving that fever was not limited to the lower ranks, in cases of sufficient communication with the sick. The fact also confirms the assertion as to the greater proportional mortality produced by fever in the higher classes of society; for in the hospitals of Killarney and Tralee, the mortality did not exceed one in seventeen.

In this county ten roman catholic clergymen died of fever; these unhappy events occurred chiefly in the year 1818; in the discharge of their office of attendance on the sick, they are peculiarly exposed to contagion: three protestant clergymen also were reported at Tralee to have died of fever, and several no doubt have suffered from slight attacks, which escaped notice or recollection. It should be observed, that none of the small detachments of troops quartered at Ross Castle, in the neighbourhood of Killarney, sickened with the disease when so prevalent in this district; proving that occlusion from the sick, aided by comfortable circumstances and habits of cleanliness, affords a certain degree of security; and this remark applies very generally to the army, so far as I could obtain information respecting it in this province. Here I may observe that the immunity of this class of persons most probably depends on the causes here assigned; for when exposed in circumstances similar to those of the lower classes, they suffer equally with them: thus at Fermoy in the county of Cork, in the 92d regiment, twenty-five cases of fever had occurred from the 13th of last February to the 4th of March; and of these, thirteen had the typhoid form, and two died. The regiment had been for some time engaged in severe duty for the revenue, and had lately made a long march in very bad weather.

County of Limerick.

1, 2, 3.—IN the county of Limerick, the misery occasioned by epidemic fever has not been exceeded in any of the counties hitherto reported on. According to the medical gentlemen of the city of Limerick, its commencement should be referred to the spring, or early part of the year 1817; however it is not improbable that it began at an earlier period; and that distress, arising from scarcity and other causes, increased the resort to hospitals about that time. No doubt can exist of its having prevailed in every district of the county of Limerick; though the want of establishments for the reception of fever patients in this county, except in the city of Limerick, renders it somewhat difficult to obtain information as to the character and progress of the disease through the county at large.

County of
Limerick.

Its frequency seems to have been greatest in the year commencing from November 1817; and it was most mortal during the four months of November and December 1817, and January and February 1818, when the numbers dying in hospital amounted to more than one-seventh of the total number sent out. It was conjectured, and I believe with good reason, that one-fourth of the inhabitants of the town had sickened with fever; and at one time the hospital was so crowded, that in many of the rooms there were five ranges of beds strewed on each floor, some containing six, many four, and few, very few, appropriated to one patient; so that in a small room of twenty-four square feet, the number of patients was not unusually forty. But this miserable state did not long continue: the military hospital in the square was granted by government for fever patients, on the application of the governors of St. John's hospital, and the preventive system was continued with a degree of perseverance and activity proportioned to the exigency of circumstances; yet it has been confidently stated that some thousand persons sickened in their homes, and there received medical treatment, from the impossibility of accommodating them in the institutions. So numerous were the admissions to the hospitals in the year commencing January 24th 1817, and ending January 23d 1818, as to exceed more than

Frequency of fever,
and great mortality.

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seven times those of some of the years most productive of fever previous to 1816. This unusual frequency of fever is partly attributable to the peculiar circumstances of some part of this city, crowded to excess with a population miserable in the extreme, dwelling in lanes filthy and neglected, and so narrow that of some of them, it may be said without exaggeration, their breadth does not exceed eight or ten feet, that fresh and pure air can scarcely ever find access to them, as nuisances of the most offensive kind seemed every where to abound. Happily, however, the influence of these causes has not been sufficient to prevent a considerable decrease of fever in this city.

4.—SCARCITY of provisions attended the commencement of epidemic fever here, as in other places. The poor in some parts of the county were compelled to collect esculent plants in the potatoe gardens; and I was assured that patients had been received into the hospitals, who had endeavoured to support life for some days together with the leaves of the wild turnip and other plants of this tribe. Deficiency of fuel, owing to the wetness of the season; an unusual resort of strangers and mendicants, to whom, in country places, the commencement of the sickness was frequently attributed, were evils perhaps more prevalent here than in other counties of this province; whilst want of employment, increased by failures in trade, added to the distress in a degree altogether unprecedented.

5.—THE disease, as the returns (No. 18.) from St. John's hospital clearly prove, now presents a different form; and diminishing in frequency, has not become more mortal, as often happens, but on the contrary has assumed a milder type.

6.—IT would be mere repetition to enter into a detail of the means employed in the hospitals to counteract the progress of fever. One of the hospitals (St. John's) has been long established, and conducted on the most approved principles, for the prevention of fever; its arrangements are in many respects entitled to imitation: its registry kept with order and precision; its managers most humane, zealous and intelligent; and sufficient funds seem alone wanting to extend its utility. Many dispensaries have been established throughout the county; but no fever hospitals, except in Limerick.

7, 8.—RELAPSES were frequent here, as in other places, and were attributed to errors in diet; they were almost totally confined to the lower classes.

9.—IT extended through families in the lower ranks very generally. Five of the physicians were attacked with fever; the event in one instance was fatal. The apothecary to St. John's hospital had three attacks of fever. All the nurse-tenders and housekeepers suffered in different degrees. This hospital has so often changed its nurse-tenders, chiefly from this cause, that it has had sixty-three within the last six months. Four of the nurse-tenders, I was informed, were lying ill of fever at the time of my visit.

Many of the roman catholic clergy in Limerick had suffered from the disease, and some of these more than once: one was reported to have taken fever in the Square hospital, of which he died. Several of the protestant and roman catholic clergymen in the diocese suffered; among these were reported the protestant clergyman of Rathkeel, and the roman catholic clergyman of Drumeallachar, to both of whom it proved fatal.

It may be right to observe, that the want of sewers in Limerick, particularly in the old town, must greatly tend to impair the health of its inhabitants.

*County of Tipperary.*County of
Tipperary.

1, 2, 3, 4.—IN the county of Tipperary, fever has declined more perhaps than in other parts of the province. This was inferred either from an inspection of the hospitals or conference with medical or other gentlemen at Clonmell, Cahir, Cashel, Tipperary, Carrick on Suir, Roscrea and Templemore.

At Clonmell the frequency of fever has been so great, that in a population of about 15,000 persons, three hospitals, together with sheds, in all containing 250 beds, were required for the accommodation of the sufferers: this happened in last July. The applications

applications for admission amounted to from twelve to fifteen daily, and at times rose to twenty. It was calculated that one-third of the inhabitants, or more, if dysenteric patients be included, had been sufferers. On March 14th ultimo, it appeared that the number of beds had been gradually reduced to sixty-three; the patients in hospital were only twenty-one, and three convalescents, and the applications for admission did not exceed six per week: such had been the decline of fever; and most medical gentlemen supposed it to have fallen to its original standard of frequency. Similar reports were obtained at Cahir, Cashell, Tipperary and Templemore: at Roscrea and Carrick on Suir, the malady was not quite subdued, though greatly diminished. At the latter place its frequency has often fluctuated, but it has never been observed to decline so steadily as at present. At Roscrea the sufferings of the poor had been very great, similar to those reported in the county of Limerick. A temporary hospital had been erected, supported by private subscription and grants from government: at the time of my visit, it was closing from want of funds, though sickness still continued to spread through poor families. Its greatest prevalence in every part of this county occurred during the last summer and autumn: at the latter period, dysentery prevailed in most parts of the county, and proved very fatal in Clonmell. In other respects, reports corresponded with those received from other counties. In the brigade of artillery, during three years, from January 1816 to the present time, not more than five cases of simple fever had occurred, and but one fatal case. No class had been altogether exempt from its attacks; but the poor suffered chiefly from its frequency, and the richer classes more in proportion from its fatality.

5, 6.—THE time of its first appearance was referred, by most medical gentlemen, to the spring, summer, or autumn of 1817. Its progress and the means adopted for its prevention were similar to those of other counties, and it seemed equally infectious, spreading among the medical and other attendants at hospitals.

7.—RELAPSES were very frequent, and at Clonmell proved very fatal. It seemed equally infectious here as in other counties. At Clonmell, five medical attendants were attacked. An active, zealous, and humane governor caught the disease, and all the nurse-tenders were attacked: two medical gentlemen died of it. The surgeon and apothecary had both been ill of fever during last April; and a physician and one of the nurse-tenders laboured under it at the time of my visit. Mendicants were supposed chiefly to have given origin to fever at Carrick on Suir, and many facts were stated which confirmed this opinion. No sickness had prevailed at Carrickbeg, till a sick family came into that place from Dungarvan.

The total decline of manufactures in Carrick on Suir have greatly added to the distresses of the inhabitants, and probably contributed in no small degree to extend the malady among them. It deserves remark, that fever has declined much more in the county of Tipperary than in the contiguous county, Waterford. The nature of the soils of these counties may in part explain the difference; the county of Tipperary consisting chiefly of limestone, which is not found in the other county, particularly in the neighbourhood of Waterford.

Thus it appears, that in every part of the five counties of this province, the epidemic fever has prevailed to an extent unprecedented in the recollection of any person living: that it is now generally on the decline, which appears more steady than at any former period; and that in many places it has almost totally disappeared: that it commenced, in most parts of the province, about the latter part of 1816, or beginning of 1817, with the scarcity of provisions and general distress consequent thereon; and that the peculiar circumstances of the people, arising from want of employment, have greatly furthered its progress. Its contagious nature is most fully established by its seizing on the medical and other attendants on hospitals, with scarcely any exception, and by its prevalence among the roman catholic clergy, as well as by its almost universal extension among the poor; it would, therefore, appear highly probable that its diffusion arose chiefly from strangers and mendicants moving through the country, carrying with them the seeds of infection.

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The crowding of apartments and the increase of filth, and neglect, the consequences of the condition of the people at that time, must have tended also to disseminate contagion. These opinions respecting its contagious nature, seem to have taken complete hold on the minds even of the poorer classes, as appears from the practice so generally followed by them, of excluding from their families those who had sickened with fever.

As to the preventive means to be adopted, in order to obviate its future increase or recurrence, it is evident that every measure serving to better the condition of the people, and to diminish pauperism and mendicity, must have a tendency to render fever less frequent, by obviating those causes which favour its progress. But these are not perhaps so immediately within our reach as others which affect the source and origin of the evil. The encouragement of local societies for the relief of the poor through the country, would disclose their wants, make known the appearance of fever among them, and otherwise produce good results, by drawing together the different classes of society, which in the country are too distinct. The establishment of temporary fever hospitals, under the management of such societies, actively instituted and vigorously supported on the first appearance of fever in a district, would tend to check its progress. Much want of information occasionally appeared, as to the best mode of conducting such establishments: in some hospitals various plans of a superior kind were in use, unknown in other establishments; at the same time defects were to be found occasionally, which information could have supplied. The only remedy in this case appears to be the adoption of some plan by which information can be communicated to some common centre, and again diffused in every requisite direction. In every plan that may be devised, I would discourage the resort of the poor to towns in times of distress; for I am persuaded this has been and still continues a fertile source of disease. The distribution of publications proceeding from persons well informed on the state of the poor and the means of obviating sickness, and having sufficient authority, derived from knowledge and experience, to command attention, would also contribute to prevent or restrain the progress of fever.

FRANCIS BARKER, M. D.

RETURN, (No. 1.)

*Waterford.—House of Recovery.*L.
MUNSTER.

Date.	Patients admitted.	Discharged, cured.	Died.
1817:			
January - -	52	48	3
February - -	44	45	1
March - - -	56	48	2
April - - -	40	52	4
May - - -	71	48	4
June - - -	77	75	3
July - - -	77	72	1
August - -	101	85	4
September -	84	90	1
October - -	104	94	5
November -	100	94	2
December -	124	118	4
1818:			
January - -	127	100	6
February - -	104	113	4
March - - -	100	107	1
April - - -	118	116	4
May - - -	114	108	8
June - - -	200	156	3
July - - -	313	261	5
August - -	340	322	9
September -	325	306	11
October - -	332	328	17
November -	308	296	18
December -	348	319	28
1819:			
January - -	377	317	23
February - -	328	283	16
March - - -	357	396	25
TOTAL -	4,721	4,397	207

At the end of the year 1817, remained in the hospital, 50 patients.

At the end of 1818, remained in the hospital, 138 patients.

On the 20th of February 1819, remained in the hospital, 206 patients.

Seventeen of the nurses and servants of the house have been attacked with fever within the last fourteen months; four of them have been attacked twice or thrice within the above period.

One nurse died from fever.

There are at present 159 beds laid in the hospital, and the wards of the Leger House, which are appropriated to fever patients; 93 of them have iron bedsteads; 66 are on the floors of the wards; and there are 44 patients obliged to lie double.

The number of patients admitted from the opening of this House of Recovery, in the year 1799 to the 1st of March 1819, were 10,018, of which, up to 1st of March 1818, were 6,629, about 348 per year; in the last year, above nine times the average.

The expenses during the last year amounted to £. 3,628. 13s. 2d. of which sum £. 800 was received from the Government, the rest supplied by local taxation, annual subscriptions and donations.

A very large sum was also subscribed for relief of dysenteric patients and convalescents from fever.

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RETURN from the *Waterford House of Recovery*, in quarterly periods,
commencing January 1817.

MONTHS.	Patients admitted.	D ^r cured.	D ^r died.
1817:			
January, February, March - -	152	141	6
April, May, June - - -	188	175	13
July, August, September - -	262	247	6
October, November, December -	328	306	11
1818:			
January, February, March - -	331	320	11
April, May, June - - -	432	380	15
July, August, September - -	978	889	25
October, November, December -	988	943	58
1819:			
January, February, March - -	1,062	996	64
TOTAL - - -	4,721	4,397	207

In the first week after the convalescent committee had commenced their operations in January 1819, the number of patients admitted to the Fever Hospital amounted to 115.

The number of patients admitted in the week ending March 30th ultimo, amounted to 44 only: thus it is evident, that in Waterford, fever was considerably on the decline at that period.

RETURN, (No. 2.)

From the temporary Fever Hospital at *Coppoguish*, County of Waterford;
commencing February 6th, 1818.

	Patients.
From February 6th to July 4th, 1818, dismissed cured -	117
Remain in fever : - - - - -	10
Convalescent - - - - -	16
Died - - - - -	3
TOTAL - - - - -	146

From July 4th to February 6th, 1819, the fever cases amounted to 73 only.

RETURN, (No. 3.)

From the temporary Fever Hospital at *Lismore*, County of *Waterford*.

Date.	Patients admitted.	Discharged cured.	Died.
1818:			
From May 18th	13	4	1
June - - -	24	19	1
July - - -	31	20	—
August - -	35	36	1
September -	17	26	—
October - -	19	14	1
November -	32	27	—
December -	28	21	1
1819:			
January - -	23	20	1
To February -	12	13	—
TOTAL - -	235	200	6

RETURN, (No. 4.)

From the temporary Fever Hospital, at *Tallow*, County of *Waterford*.

Date.	Patients admitted.	Discharged cured.	Died.
1818:			
From June -	18	18	—
July - - -	38	37	1
August - -	27	26	1
September -	35	24	1
October - -	11	2	—
November -	27	26	1
December -	27	21	1
1819:			
January - -	14	12	2
To February			
24th - -	10	—	—
TOTAL - -	207	166	7

Remaining in hospital 21, on February 24th.

Remaining in hospital 13 patients, on March 2d.

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RETURN, (No. 5.)

From the House of Recovery at Youghal, County of Cork.

Date.	Patients admitted.	Discharged cured.	Died.
1817:			
January - -	5	5	—
February - -	3	3	—
March - -	5	4	1
April - - -	8	8	—
May - - -	6	6	—
June - - -	10	10	—
July - - -	15	15	—
August - -	28	28	—
September -	33	31	2
October - -	44	43	1
November -	45	44	1
December -	33	32	1
1818:			
January - -	32	31	1
February - -	34	31	3
March - -	40	40	—
April - - -	33	31	2
May - - -	27	22	5
June - - -	22	21	1
July - - -	43	42	1
August - -	33	30	3
September -	30	30	—
October - -	35	34	1
November -	24	24	—
December -	19	19	—
1819:			
January - -	16	16	—
TOTAL - -	623	600	23

Remaining in the hospital, at present, eight patients, all convalescent.—
February 25th.

From July 1816 to July 1817, the number of patients admitted to the hospital amounted to 51, of whom two died.

From July 1817 to July 1818, the number amounted to 386, of whom 16 died. The extern cases, during the latter period, were 936.

From July 1818 to February 16th 1819, the number of patients admitted to the hospital amounted to 205, of whom four died. During that period, the extern fever cases were 247, of whom four died.

RETURN, (No. 6.)

I
MUNSTER.From the House of Recovery at *Youghal*, in quarterly periods, commencing
January 1817.

Months.	Patients admitted.	Discharged cured.	Died.
1817:			
January, February, March - -	13	12	1
April, May, June - - -	24	24	—
July, August, September - -	76	74	2
October, November, December -	122	119	3
1818:			
January, February, March - -	106	102	4
April, May, June - - -	82	74	8
July, August, September - -	106	102	4
October, November, December -	78	77	1

In January last, sixteen patients only were admitted; and on February 25th, eight patients, all convalescent, remained in the hospital, which contained twenty beds.

RETURN, (No. 7.)

From the temporary Fever Hospital at *Middleton*, County of *Cork*.

Admitted to the temporary Fever Hospital, 74 patients, of whom two died.
The hospital is now closed.

RETURN, (No. 8.)

From the Fever Hospital in *Cork*.

Date	Patients admitted.	Discharged cured.	Died.
1817:			
From January	161	140	8
February - -	151	148	8
March - - -	159	160	5
April - - -	181	173	6
May - - -	230	221	6
June - - -	219	220	9
July - - -	213	190	5
August - -	229	220	7
September -	388	394	12
October - -	425	426	19
November -	390	322	11
December -	389	358	11

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Return, (No. 8.)—Fever Hospital, Cork—continued.

Date.	Patients admitted.	Discharged cured.	Died.
1818:			
January - -	327	301	13
February - -	344	320	11
March - -	415	390	12
April - -	411	394	4
May - -	509	485	11
June - -	556	535	8
July - -	657	636	8
August - -	649	623	13
September -	542	507	22
October - -	542	519	10
November -	465	439	13
December -	462	437	12
1819:			
January - -	377	325	15
February - -	342	295	10
To March -	374	325	12
TOTAL - -	10,117	9,442	281

RETURN, (No. 9.)

Of the Number of Patients discharged cured, and died, in all the different Fever Hospitals of Cork, in the years 1817, 1818, and part of 1819, in monthly periods.

Months	Fever Hospital and Asylum; discharged.	Died.	Peacock-lane Fever Asylum; discharged.	Died.	GRAND TOTAL
1817:			1817:		
January - -	140	8	Note. — Monthly returns from this hospital have not been obtained.		
February - -	148	8			
March - -	160	5			
April - -	173	6			
May - -	221	6	Opened on July 1st.	—	—
June - -	229	9		—	—
July - -	190	5		—	—
August - -	220	7		—	—
September -	324	12	—	—	—
October - -	426	19	—	—	—
November -	322	11	—	—	—
December -	436	20	—	—	—
1818:					
January - -	422	23	—	—	—
February - -	458	18	—	—	—
March - -	561	17	—	—	—
April - -	571	16	—	—	—
May - -	718	19	—	—	—
June - -	754	13	—	—	—
July - -	906	14	2,783	102	—

(continued)

Return, (No. 9.)—Fever Hospitals, Cork—continued.

I.
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Months.	Fever Hospital and Asylum; discharged.	Died.	Pencock-lane Fever Asylum; discharged.	Died.	GRAND TOTAL.
1818:			Closed on the 24th		
August - -	924	21	528	10	—
September - -	695	34	—	—	—
October - -	725	17	—	—	—
November - -	710	24	—	—	—
December - -	636	21	—	—	—
1819:					
January - -	459	23	—	—	—
February - -	401	13	—	—	—
March - -	325	12	—	—	—
TOTAL - -	12,254	401	3,311	112	16,078

RETURN, (No. 10.)

From the South Fever Asylum, in Cork.

Date.	Patients admitted.	Discharged cured.	Died.
1817:			
December -	195	78	9
1818:			
January - -	139	121	10
February - -	137	138	7
March - -	165	171	5
April - -	204	177	12
May - -	212	233	8
June - -	251	219	5
July - -	282	270	6
August - -	264	301	8
September -	207	188	12
October - -	234	206	7
November -	215	271	11
December -	204	199	9
1819:			
January - -	167	134	8
February - -	138	106	3
TOTAL - -	3,014	2,812	120

This hospital is now closed.

I.
MUNSTER.

RETURN, (No. 11.)

Of Patients relieved from the Dispensary at *Cork*.

Date.	Patients admitted.	Of these, were Patients in Fever.
1817:		
January - - -	542	108
February - - -	482	121
March - - -	530	100
April - - -	626	213
May - - -	776	359
June - - -	795	475
July - - -	781	420
August - - -	734	480
September - - -	822	554
October - - -	1,077	635
November - - -	1,055	649
December - - -	1,003	639
1818:		
January - - -	1,101	849
February - - -	989	685
March - - -	1,116	740
April - - -	1,143	682
May - - -	1,311	866
June - - -	1,593	1,108
July - - -	1,781	1,203
August - - -	1,710	1,173
September - - -	1,513	1,015
October - - -	1,325	889
November - - -	1,109	697
December - - -	931	573
TOTAL - -	24,841	15,233

The greater number of the above fever patients, were sent to hospitals.

RETURN, (No. 12.)

From the Peacock-lane Fever Asylum, in *Cork*.

From July 1st 1817, to July 1st 1818.

Number of Persons admitted - - -	3,013
Sent home cured - - -	2,783
Died - - -	102
At present in the Asylum - - -	128
	3,013

From the 1st July to 24th August, when the house was closed - 528
 Died of this latter number - - - - - 40

RETURN, (No. 13.)

From the Fever Hospital at Bandon, County of Cork.

I.
MUNSTER.

Date.	Patients admitted.	Discharged cured.	Died.
1818:			
From March 13th	14	11	3
April - - -	21	20	1
May - - -	48	46	2
June - - -	169	105	4
July - - -	268	260	8
August - - -	150	144	6
September - -	190	180	10
October - - -	132	116	16
November - -	72	66	6
December - -	69	68	1
1819:			
January - - -	68	60	4
To Feb. 28th -	37	10	1
TOTAL - -	1,178	1,086	62

In the hospital on the 1st of March, 27 patients.

Total number of beds, 49.

Number of beds vacant, 22.

RETURN, (No. 14.)

From the Dispensary and Fever Hospital, Fermoy, County of Cork.

In the year 1817, received the benefits of the Dispensary and Fever Hospital;

Interns	-	-	-	-	105
Externs	-	-	-	-	980

Total - - - 1,085

In the year 1818:

Interns	-	-	-	-	346
Externs	-	-	-	-	1,000

Total - - - 1,346

In June last the number of fever patients amounted to 101; of these 42 were interns, the remainder extern patients.

Temporary hospitals were erected; but on December 31st 1818, it was reported that the patients in the hospital were

In extra house	-	-	-	-	14
Externs	-	-	-	-	4
	-	-	-	-	25

Total - - - 43

Showing a great decline; and this has been progressive.

I
MUNSTER.

RETURN, (No. 15.)

From the Fever Hospital at *Mallow*, County of *Cork*.

Date.	Patients admitted.	Discharged cured.	Died.
1817:			
From June -	15	6	—
July - - -	21	10	—
August - -	54	30	4
September -	87	74	3
October - -	56	60	4
November -	48	53	2
December -	56	53	2
1818:			
January - -	77	61	2
February - -	69	50	3
March - - -	59	45	14
April - - -	65	65	4
May - - -	84	56	16
June - - -	81	78	11
July - - -	79	75	8
August - -	78	78	8
September -	94	82	8
October - -	91	80	5
November -	48	48	6
December -	59	64	5
1819:			
January - -	47	35	2
To February -	37	48	2
TOTAL - -	1,287	1,160	109

The number of bedsteads in this hospital amounted to 45.

The number of patients in the hospital, 17 only, on the 4th of March last.

RETURN, (No. 16.)

From the Fever Hospital at *Killarney*, in the County of *Kerry*.

Date.	Patients admitted.	Discharged cured.	Died.
1817:			
July - - -	48	47	1
August - -	46	46	—
September -	50	50	—
October - -	41	40	1
November -	47	47	—
December -	64	62	2
1818:			
January - -	98	95	3
February - -	87	86	1
March - - -	86	83	3
April - - -	70	69	1

(continued)

Return, (No. 16.)—Fever Hospital at Killarney—continued.

I.
MUNSTER.

Date,	Patients admitted.	Discharged cured.	Died.
1818:			
May - - -	135	134	1
June - - -	146	144	2
July - - -	97	95	2
August - -	78	78	—
September -	68	68	—
October - -	49	49	—
November -	51	50	1
December -	42	41	1
1819:			
January - -	22	21	1
February - -	22	4	1
TOTAL - -	1,347	1,309	21

This hospital contained 21 beds for fever patients; and the total number of patients, including many convalescents, in hospital, amounted to 18.

RETURN, No. 17.

From the Fever Hospital at Tralee, County of Kerry.

Date.	Patients admitted.	Died.
1817:		
From August 8 - } to September 8 - }	26	1
October 8 - - -	36	1
November 8 - -	39	2
December 8 - -	40	—
1818:		
January 8 - - -	42	—
February 8 - - -	39	—
March 8 - - -	28	—
April 8 - - -	40	1
May 8 - - -	43	1
June 8 - - -	56	—
July 8 - - -	70	—
August 8 - - -	82	—
September 8 - -	66	1
October 8 - - -	61	1
November 8 - -	49	3
December 8 - -	49	2
1819:		
January 8 - - -	37	—
February 8 - - -	30	1
March 8 - - -	22	—
TOTAL - -	855	14

The number of beds in the hospital, 24.

The number of patients 10; all convalescent, March 7th 1819.

L.
MUNSTER.

RETURN, (No. 18.)

Of Fever Patients admitted into St. John's Hospital, at Limerick.

Date.	Patients admitted.	Discharged, cured.	Died.
1816 :			
August - -	66	66	1
September - -	58	44	6
October - -	74	67	3
November - -	58	60	3
December - -	73	46	7
1817 :			
January - -	78	85	1
February - -	110	112	3
March - -	136	106	8
April - -	175	157	7
May - -	229	189	24
June - -	187	191	10
July - -	205	178	14
August - -	274	251	24
September - -	265	276	12
October - -	240	220	20
November - -	250	203	23
December - -	265	181	25
1818 :			
January - -	221	190	49
February - -	196	177	30
March - -	181	175	18
April - -	194	138	22
May - -	206	205	20
June - -	261	281	10
July - -	387	330	8
August - -	382	385	16
September - -	342	338	10
October - -	375	449	13
November - -	315	394	10
December - -	365	306	11
1819 :			
January - -	203	185	6
February - -	159	165	7
To March 10th	51	51	6
TOTAL - -	6,743	6,201	427

Number of beds, 62.

And number of beds at present occupied, 35.

The use of the military hospital in the square was granted by Government in consequence of the increase of fever; and from the 6th of January to October 6th, 1818, 2,663 patients were admitted to these arylums.

It contained 72 beds and 41 patients, on March 10th 1819; and it was about to be closed at that time.

RETURN, (No. 19.)

From the temporary Fever Hospital at Tipperary.

L.
MUNSTER.

Date.	Patients admitted.	Discharged cured.	Died.
1818:			
February - -	10	4	1
March - - -	16	11	1
April - - -	20	17	1
May - - -	33	22	4
June - - -	21	17	3
July - - -	36	26	5
August - -	25	25	3
September -	15	19	1
October - -	23	15	3
November -	15	24	3
December -	19	14	—
1819:			
January - -	3	12	3
TOTAL - -	256	206	28

RETURN, (No. 20.)

From the temporary Fever Hospital at Cashel, County of Tipperary.

Date.	Patients admitted.	Discharged cured.	Died.
1817:			
From July 22d -	14	2	—
August - - -	57	33	2
September - -	42	50	1
October - - -	79	35	—
November - -	19	57	2
December - -	26	36	1
1818:			
January - - -	27	21	1
February - -	17	11	1
March - - -	36	33	2
April - - -	19	15	8
May - - -	26	29	6
June - - -	29	22	4
July - - -	40	31	7
August - - -	23	32	3
September - -	51	27	—
October - - -	39	50	1
November - -	27	33	4
December - -	14	22	1
1819:			
January - - -	13	7	1
February - -	17	18	1
To March 13th -	8	2	1
TOTAL - -	629	566	47

The number of beds, 30.

The number of patients, on the 12th of March, only 10; and of these, one-half were in a state of convalescence.

I.
MUNSTER.

RETURN, (No. 21.)

From the Fever Hospital at Cahir, County of Tipperary.

Date.	Patients admitted.	Discharged, cured.	Died.
From January 1815, to Jan. 1816 - - }	49	49	—
From January 1816, to Jan. 1817 - - }	59	57	2
1817:			
January - -	14	14	—
February - -	7	6	1
March - -	—	—	—
April - -	17	17	—
May - -	28	26	2
June - -	12	10	2
July - -	23	21	2
August - -	33	33	—
September - -	35	33	2
October - -	34	33	1
November - -	18	17	1
December - -	29	29	—
1818:			
January - -	30	28	2
February - -	25	25	—
March - -	36	33	3
April - -	21	20	1
May - -	28	28	—
June - -	54	53	1
July - -	49	48	1
August - -	35	33	2
September - -	51	49	2
October - -	39	38	1
November - -	28	28	—
December - -	18	17	1
TOTAL - -	772	745	27

REMARK.

The patients were admitted to the hospital during two years, commencing with January 1815, and ending with January 1817, at the rate of from four to five only per month. This hospital contained accommodation for 34 patients. On the 12th March last, there were only two patients in the hospital, both in a convalescent state.

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RETURN, (No. 22.)

I.
MUNSTER.

From the temporary Fever Hospital at Templemore, County of Tipperary.

Date.	Patients admitted.	Discharged cured.	Died.
1818:			
From Septem- ber 1st - -	24	23	1
October - -	22	21	1
November - -	9	9	—
December - -	14	14	—
1819:			
January - -	7	7	—
February - -	9	7	2
To March 20	6	—	—
TOTAL - -	91	81	4

RETURN, (No. 23.)

From the temporary Fever Hospital at Carrick-on-Suir, County of Tipperary.

Patients admitted to the temporary hospital, from November 1st

1817 to January 12th 1818 - - - - - 45

Admitted from January 12th to May 1st 1818 - - - - - 200

On May 1st, a more commodious Hospital, fit for the accommodation of 32 Patients, was established.

Date.	Patients admitted.	Discharged cured.	Died.
1818:			
May - - -	45	34	3
June - - -	62	53	—
July - - -	119	110	3
August - -	87	83	1
September -	66	66	4
October - -	79	51	4
November - -	80	79	3
December - -	56	59	6
1819:			
January - -	29	29	4
February - -	68	47	2
TOTAL - -	961	641	30

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MUNSTER.

RETURN, (No. 24.)

From the different Fever Hospitals at Clonowell, County of Tipperary.

Date.	Patients admitted.	Discharged cured.	Died.
1818:			
January - -)	457	336	17
February - -)			
March - -)			
April - - -	255	234	10
May - - -	218	181	11
June - - -	384	287	22
July - - -	337	304	11
August - -	341	320	25
September -	266	279	21
October - -	158	205	13
November -	156	176	12
December -	88	96	5
1819:			
January - -	69	97	3
February - -	46	57	4
TOTAL - -	2,775	2,603	154

Total number of beds in the hospital at present, 63.

Remaining in the hospital on March 13th, 21 patients and three convalescents.

Fever has never been so little prevalent as at present, since its first invasion epidemically.